

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>b.m.</i>		<i>01-04-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>EA</i>	<i>1120</i>	<i>9-13-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	3/2/02
2	✓	✓	3/2/02
3	✓	✓	3/2/02
4	✓	✓	3/2/02
5	✓	✓	3/2/02
6	✓	✓	3/2/02
7	✓	✓	3/2/02
8	✓	✓	3/2/02
9	✓	✓	3/2/02
10	✓	✓	3/2/02
11	✓	✓	3/2/02
12	✓	✓	3/2/02
13	✓	✓	3/2/02
14	✓	✓	3/2/02
15	✓	✓	3/2/02
16	✓	✓	3/2/02
17	✓	✓	3/2/02
18	✓	✓	3/2/02
19	✓	✓	3/2/02
20	✓	✓	3/2/02
21	✓	✓	3/2/02
22	✓	✓	3/2/02
23	✓	✓	3/2/02
24	✓	✓	3/2/02
25	N	N	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

6/4/01
1/1/01